# Request for Hawaii Driver History Record STATE OF HAWAII

Name of Current or F	Prospective Motor	Carrier:						
To the specific attention of:					Business Telephone			
Mailing Address (Num	ber and Street)							
City			State		2	Zip Code		
history of convictions,	s the Traffic Violati accidents, and with	ions Bureaus of th idrawals pertainin	g to the driver id	entified in th	is part, prov	arch of the driver's lice ided that the driver sign g actions received from	s the consent below.	
Toriver License Numbe	<mark>ype or Print Clear</mark> r	ly (Complete all i	tems. Inquiries th	at cannot be	read will not	be processed.)		
Month, Day, and Year	of Birth	/	_/		:			
Driver's Full Legal Na	me: First Name M	iddle Name		Last Nan	ne			
Other Names Used (Maiden, Prior Name, Nickname, Professional I			sional Name, Ot	ame, Other)			Daytime Telephone Number	
the search will result in further understand that motor carrier. If a curre	Traffic Violations In a printed report the if a current or prosective rehistory record from	Bureau of the Distant will indicate: ( spective motor care notor carrier has re-	rict Courts to per  1) No record was  rier has requested  equested my drive	form a one-to s found mated d my driver he der history rec	hing my iden history record cord, I unden	of my driver history recontification, or (2) the driver history and the printed report will restand that I also have the written request and pay.  Date	ver history record. I l only be sent to that he right to obtain my	
Official Use Only  Date Received Date Sent			T		NOTARIZATION  Required only if the Driver History Record Request is not made in person by the current or prospective <b>operator</b> .  Sworn to and ascribed before me Notary Public			
Date Necerveu	Date Sent				this	day of	Notary Public Seal or Stamp	
TYPE OF IDENTIFICATION: ☐ Valid Photo Driver License ☐ Valid Photo State ☐ Valid Passport ☐ Valid Military ID			e-issued ID	20	in the County of			
Clerk (Print Name)			Signature		State of Ha	waii		

## **Request for Hawaii Driver History Record**

http://hawaii.gov/dot/highways/about/hwy-v/mvso/htm

Phone: 808.692.7659

Email: DRIVERRECORDS.HWYV@HAWAII.GOV

Changed to 692-7656 or 7658

### Who May Obtain a Hawaii Driver History Record

- Any person may ask to know whether there is a record on him or her and may obtain a copy of the record if one exists.
- A motor carrier or prospective motor carrier may request a driver's driver history record, provided the request is made by the driver in person or notarized. The mailed results of the driver history record check will be sent only to the current or prospective motor carrier. If no motor carrier is named on the form or it is changed, the request will not be processed. "Motor carrier" means any person who owns a motor vehicle used in, or engages in the transportation of persons or property by motor vehicle on the public highways in the furtherance of any commercial, industrial, or educational enterprise.

#### **A Driver History Record Shows**

- The name, the date of birth, and the mailing address of the driver.
- The driver license class, endorsements, and restrictions.
- The current status and the expiration date of the driver license.
- Accidents, moving traffic violations, failures to appear, and suspensions or revocations of the driver license, including those from other states.
- Information reported within the past 3 years from the date of the inquiry and suspensions and revocation over five years old that are still in effect.

#### How to Request a Driver History Record

To request a copy of your own record. Complete Part I, show your identification, and pay the \$9.00 fee. Acceptable identification documents include a valid driver's license, state identification card, passport, or military identification card.

To request the record of your current or prospective driver. Complete this form, including the notarization, and pay the \$9.00 fee. Attach a self-addressed stamped envelope for return of the requested information.

To order a driver history record by mail. Your request <u>MUST BE NOTARIZED</u> to certify identity. Mail completed form with cashier's check or money order made payable to: District Court. Attach a self-addressed stamped legal-sized envelope (#10) for return of the requested information. Mailed requests will have a turnaround time of 5-10 days.

# **Location of Driver History Records**

Wahiawa, HI 96786-2274

Records on individuals can be made available to those individuals, within a reasonable time after request, for personal inspection and copying during regular working hours at 8:00 a.m. to 4:00 p.m., each day except Saturdays, Sundays, and State legal holidays. The address for requesting record information in writing or for making requests in person is as follows:

Honolulu District Court		Kaunakakai, HI 96748	79-1020 Haukapila Street
Traffic Violations Bureau	Waianae/Nanakuli District	Mailing address: P.O Box 284	Kealakekua, HI 96750
1111 Alakea Street, 2 <sup>nd</sup> Floor	Court	Kaunakakai, HI 96748-0284	
Honolulu, HI 96813-2897	87-1784 Farrington Highway		South Kohala District
	Waianae, HI 96792	Lanai District Court	Court
Ewa/Pearl City District Court		730 Lana'i Avenue, Suite 131	67-5187 Kamamalu Street
870 Fourth Street	Wailuku District Court	Lanai City, HI 96763	Kamuela, HI 96743
Pearl City, HI 96782-3312	Traffic Violations Bureau	Mailing address: P.O. Box	,
•	2145 Main Street, Room 137	631376	Lihue District Court
Abner Paki Hale, Kaneohe	Wailuku, HI 96793-1679	Lanai City, HI 96763-1376	3970 Kaana Street
Courhouse	,	,,,	Lihue, HI 96766
45-939 Pookela Street	Lahaina/Hana District Court	Hawaii District Court	, , , , , , , , , , , , , , , , , , , ,
Kaneohe, HI 96744-5725	1870 Honoapi'ilani Highway	777 Kilauea Avenue	
	Lahaina, HI 96761-1856	Hilo, HI 96720	
Wahiawa/Waialua District Court	•	•	
1034 Kilani Avenue	Molokai District Court	Kona District Court	

Keakealani Building

55 Makaena Street